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ABSTRACT

This memorandum of understanding among the Colorado Departments of Education, Public Health and Environment, Human Services, and Health Care Policy and Financing, describes how the agencies will work together in the implementation of Part H of the Individuals with Disabilities Education Act (IDEA). The agreement covers: (1) a statement of common purpose; (2) common definitions of terms; (3) the values base for agreement, including family involvement, community collaboration, and the promotion of natural environments; (4) the authority for the agreement which lists the different laws and regulations that require cooperation among state departments; (5) the intended outcomes of the statewide early intervention service delivery system; (6) mutual objectives of the program at the state and local level; (7) each agency's commitment to outcomes and objectives; (8) the individual responsibilities of each department; (9) the procedural safeguards relating to parental and child rights; (10) the confidentiality of information; (11) the transition from Part H to Part B of IDEA (preschool services); (12) the coordination with other state and federal initiatives; (13) the state agency dispute resolution process; (14) the role of the Colorado Department of Education in supervising and monitoring; and (15) the review of the agreement. (CR)

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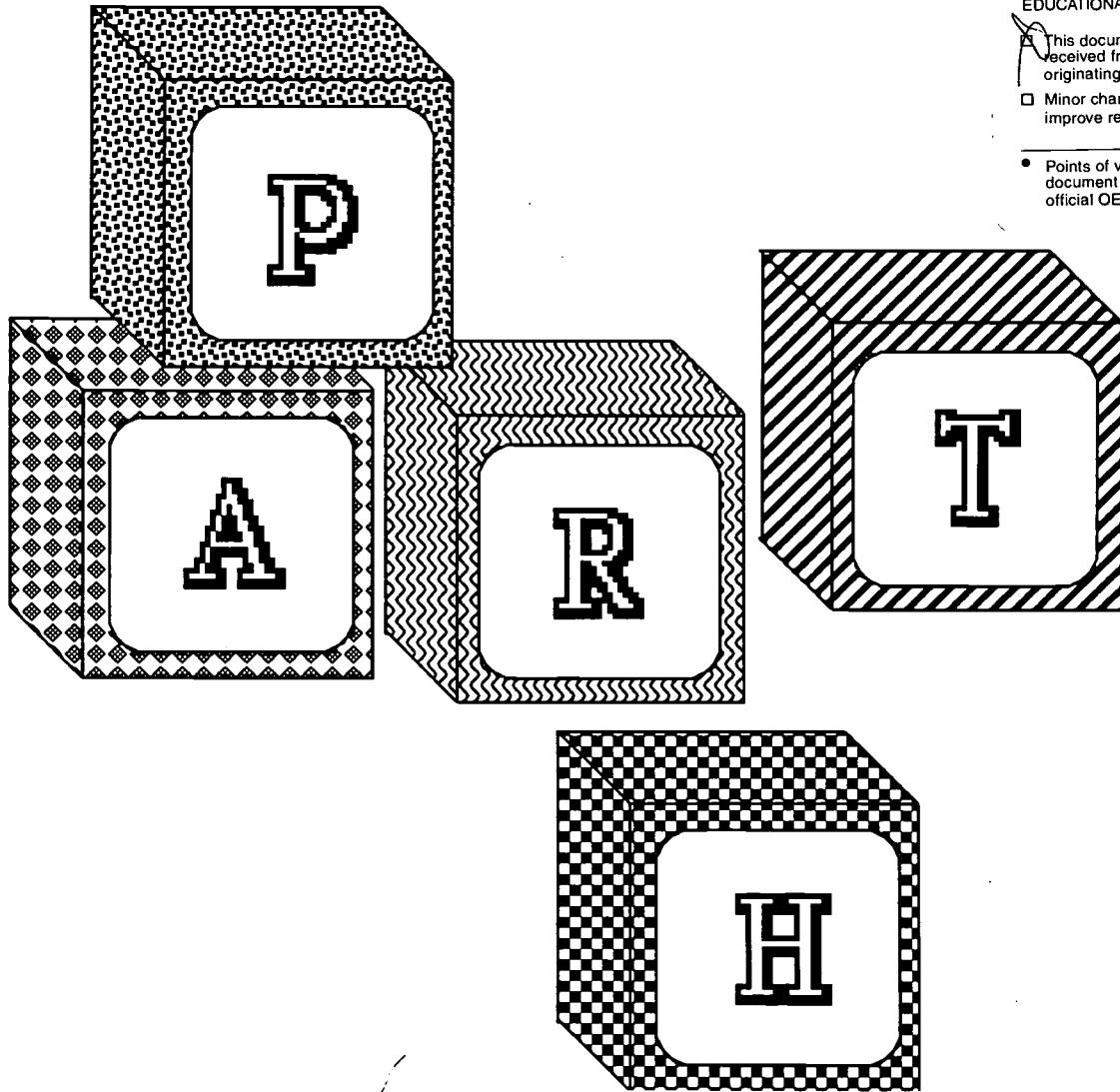
**MEMORANDUM OF UNDERSTANDING
AMONG the COLORADO DEPARTMENTS OF
EDUCATION, PUBLIC HEALTH AND
ENVIRONMENT, HUMAN SERVICES, AND
HEALTH CARE POLICY AND FINANCING
for the IMPLEMENTATION in COLORADO
of PART H of the INDIVIDUALS WITH
DISABILITIES EDUCATION ACT**

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**MEMORANDUM OF UNDERSTANDING
AMONG the COLORADO DEPARTMENTS OF EDUCATION, PUBLIC HEALTH
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FINANCING for the IMPLEMENTATION in COLORADO of PART H of the
INDIVIDUALS WITH DISABILITIES EDUCATION ACT**

I. STATEMENT OF COMMON PURPOSE

This Agreement among the Colorado Departments of Education, Public Health and Environment, Human Services, and Health Care Policy and Financing relates to the implementation of Part H of the Individuals with Disabilities Education Act (IDEA) in Colorado.

It is the mutual goal of the agencies to continue the implementation of an appropriate statewide, comprehensive, coordinated system of early intervention supports and services for all infants and toddlers with disabilities according to the Colorado Part H application to the Office of Special Education Programs (OSEP), United States Department of Education (USDE). In keeping with the intent and requirements of the law, this agreement documents interagency coordination and collaboration under the administrative leadership of the Departments involved.

State Departments have authority to manage service delivery through contracts, grants, policies and procedures, or regulations. It is the intent of this Agreement to assure the following:

- A. The development of an interactive, cooperative relationship at the State level to minimize duplication of supports and services and to assist local communities to develop cooperative relationships which result in effective and efficient supports and services for infants and toddlers with disabilities and their families.
- B. Cooperative fiscal planning that maximizes utilization of available funds in providing supports and services to infants and toddlers with disabilities and their families.

II. COMMON DEFINITIONS (§ 303.6 - § 303.22)

When used in this Memorandum of Understanding (MOU), the following terms are defined in accordance with IDEA, Part H.

- 1. **Early Intervention System of Supports and Services:** The total effort in a State that is directed at meeting the needs of infants and toddlers with disabilities and their families.

2. **Early Intervention Supports and Services:** Supports and services that --
 - Are designed to meet the developmental needs of each infant and toddler with a disability and the needs of the family related to enhancing the child's development;
 - Are selected in collaboration with the parents;
 - Are provided --
 - Under public supervision;
 - By *qualified* personnel, as defined in § 303.21, including the types of personnel listed in paragraph (e) of this section;
 - In conformity with an individualized family service plan;
 - At no cost, unless, subject to § 303.520(b)(3), Federal or State law provides for a system of payments by families, including a schedule of sliding fees; and
 - Meet the standards of the State, including the requirements of this part.
3. **Evaluation:** The procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility under Part H, consistent with the definition of "infants and toddlers with disabilities" including determining the status of the child in each of the following developmental areas: cognitive; physical, including vision and hearing; communication; social or emotional; and adaptive.
4. **Assessment:** The ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility under Part H to: identify the child's unique strengths and needs and the supports and services appropriate to meet those needs; and with the permission of the family, to determine the resources, priorities and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child.
5. **Natural Environments:** To the maximum extent appropriate to the needs of the child, early intervention supports and services must be provided in natural environments, including the home, and community settings in which children without disabilities participate. *Natural environments* means settings that are natural or normal for the child's age peers who have no disability.
6. **IFSP:** The individualized family service plan means a written plan for providing early intervention supports and services to an infant or toddler with a disability and the child's family. Regulations that pertain to the IFSP are articulated in 303.340 - 303.346 of IDEA, Part H.
7. **Infants and Toddlers With Disabilities:** Infants and toddlers with disabilities as defined by IDEA, Part H, 34 CFR 303.16: Individuals from

birth through age two who need early intervention supports and services because they --

- Are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas:
 - Cognitive development.
 - Physical development, including vision and hearing.
 - Communication development.
 - Social or emotional development.
 - Adaptive development; or
- Have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.

8. **Parent:** A parent, a guardian, a person acting as a parent of a child, or a surrogate parent who has been appointed in accordance with § 303.406.

The term does not include the State if the child is a ward of the State.

Note: The term "parent" has been defined to include persons acting in the place of a parent, such as a grandparent or stepparent with whom a child lives, as well as persons who are legally responsible for the child's welfare. The definition in this section is identical to the definition used in the regulations under Part B of the Act (34 CFR 300.13).

9. **Policies:** State statutes, regulations, Governor's orders, directives by the lead agency, or other written documents that represent the State's position concerning any matter covered under this part.

- State policies include --
 - A State's commitment to develop and implement the statewide system (see § 303.150);
 - A State's eligibility criteria and procedures (see § 303.300);
 - A statement that, consistent with § 303.520(b), provides that services under this part will be provided at no cost to parents, except where a system of payments is provided for under Federal or State law;
 - A State's standards for personnel who provide early intervention supports and services to infants and toddlers with disabilities (see § 303.361);
 - A State's position and procedures related to contracting or making other arrangements with service providers under subpart F of this part; and
 - Other positions that the State has adopted related to implementing any of the other requirements under this part.

10. **Public Agency:** Includes the lead agency, other State agencies as referenced in this document and respective local agencies of the State that are responsible for providing early intervention supports and services to infants and toddlers with disabilities and their families.

11. **Qualified:** Means that a person has met State approved or recognized certification, licensing, registration, or other comparable requirements that apply to the area in which the person is providing early intervention supports and services.
12. **Service Coordination:** The activities carried out by a service coordinator to assist and enable an infant or toddler with a disability and the child's family to receive the rights, procedural safeguards, and services that are authorized to be provided under the State's early intervention program.
 - Each infant or toddler with a disability and the child's family must be provided with one service coordinator, at no cost, who is responsible for --
 - Coordinating all services across agency lines; and
 - Serving as the single point of contact in helping parents obtain the services and assistance they need.
 - Service coordination is an active, ongoing process that involves --
 - Assisting parents of infants and toddlers with disabilities in gaining access to the early intervention supports and services and other services identified in the individualized family service plan;
 - Coordinating the provision of early intervention supports and services and other services (such as medical services for other than diagnostic and evaluation purposes) that the child needs or is being provided;
 - Facilitating the timely delivery of available services; and
 - Continuously seeking the appropriate services and situations necessary to benefit the development of each child being served for the duration of the child's eligibility.

III. VALUES BASE FOR AGREEMENT

A strong values base underlies the Colorado Part H early intervention system of supports and services. This values base is supported by the values adopted by the Colorado Interagency Coordinating Council (CICC):

- Children and families are valued for their unique capacities, experiences and potential;
- Families have the right and responsibility to make decisions on behalf of their children and themselves;
- Communities are enhanced by recognizing and honoring the diversity among all people;

- Families make the best choices when they have comprehensive information about the full range of formal and natural resources in their communities;
- Creative, flexible and collaborative approaches to services allow for individual child, family and community differences.

The parties to this Memorandum of Understanding recognize these underlying values and assure that they will be reflected through the following components that are delineated in the Part H statute.

A. Family Involvement

Families will be key participants in all aspects of Part H implementation. With respect to individual infants and toddlers with disabilities, families will be the primary decision makers using the expertise, knowledge and support of service providers as appropriate. Supports and services should be responsive to the resources, priorities and concerns of families and accommodate families rather than families accommodating the services. With respect to policy and systems development at the state and local levels, family members will act as active and equal participants in discussion and decision making. It is recognized that the best interests of children are served when families and professionals work in partnership.

B. Community Collaboration

In enacting Part H, Congress made clear that the success of this initiative requires interagency and community collaboration in providing and paying for appropriate early intervention supports and services. It is recognized that no one agency, or even the total formal service system, would ever be able to offer the full array of supports and services articulated on the Individualized Family Service Plan (IFSP). Therefore, community collaboration is essential at the State and local levels. Each community entity offers its own unique set of skills, experiences and expertise. The scope of the Part H delivery system requires that infants and toddlers with disabilities and their families have easy access to the early intervention supports and services offered by the entire community.

C. Natural Environments

Supports and services for infants and toddlers with disabilities and their families should be designed to enhance access to natural environments. To the greatest extent possible, children will have the opportunity to benefit from supports and services in settings that are natural and normal for the child's age peers who have no disability.

IV. AUTHORITY FOR AGREEMENT

Colorado is committed to continued development and implementation of a coordinated, comprehensive, interagency support and service delivery system for all infants and toddlers with disabilities and their families. This commitment is evidenced by the acceptance of funds in the Part H Federal Grant Program. In 1987, Governor Romer appointed the Colorado Department of Education as the lead agency to administer the Part H program at the State level and appointed members to an Interagency Coordinating Council (ICC) to advise and assist the lead agency in the provision of early intervention supports and services.

Federal law and regulations require cooperation among State departments responsible for the administration and/or supervision of both Title V (relating to Maternal and Child Health) and Title XIX of the Social Security Act (relating to the general Medicaid program and EPSDT). As a condition of receiving federal funds under Part H of the Individuals with Disabilities Education Act (IDEA), States were directed to ensure cooperation among Departments involved in delivering supports and services to infants and toddlers with disabilities and their families. Therefore, this agreement is to enable the State Departments to cooperate and coordinate as authorized by State and Federal statutes and regulations.

The responsibilities and objectives delineated in this agreement are referenced and supported in the following Federal and State legislative statutes:

- Individuals with Disabilities Education Act (IDEA) addresses special education and related services for children with disabilities. IDEA, Part H charges states to develop and implement a comprehensive, coordinated, interagency system of supports and services for infants and toddlers with disabilities and their families to ensure cooperation among departments.
- Developmental Disabilities Assistance and Bill of Rights Act Amendments of 1987 assures that individuals with developmental disabilities and their families participate in the design of and have access to culturally competent services, supports, and other assistance and opportunities that promote independence, productivity, and integration and inclusion into the community.
- Title IV-B of the Social Security Act provides federal funding for general child welfare services to children and families who meet eligibility criteria. Title IV-B, Subpart 2, Family Preservation and Support Services, Omnibus Budget Reconciliation Act of 1993, aims to promote family strength and stability, enhance parental functioning and protect children through

funding a capped entitlement to states to provide family support and family preservation services, which the law defines broadly.

- Title IV-A of the Social Security Act provides emergency assistance for families with children who are at risk of placement out of the home.
- Title IV-E of the Social Security Act and Supplemental Security Income (SSI) enables states to provide foster care and adoption assistance for children who otherwise would be eligible for aid to families with dependent children.
- Title V of the Social Security Act, section 505 (2) (E) allows for the participation with other state programs involved with the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program carried out under Title XIX to ensure that there is no duplication of effort; in the arrangement and carrying out of coordination agreements described in Section 1902 (a) (11), relating to coordination of care and services available under this Title and Title XIX; in coordinating activities within the State with programs carried out under this Title and related federal grant programs such as Supplemental Food Program for Women, Infants and Children (WIC), related educational programs, and other health and developmental disability programs.
- Title XIX of the Social Security Act (grants to states for Medical Assistance Programs), Section 1902 (a) (11) (A) provides for the entering into cooperative arrangements with the State departments responsible for administering and/or supervising the administration of services to ensure maximum utilization of such services and provides federal funding for EPSDT programs for children who meet eligibility criteria.
- Title XX of the Social Security Act provides a block grant to states for the provision of social services. In Colorado, these funds are used to help pay for a variety of services at the county departments of social services.
- The January 1990 Consolidation of the Child Nutrition Act requires the Supplemental Food Program for Women, Infants, and Children (WIC) Program to coordinate with other state programs such as well-child care, maternal and child health care, EPSDT Program and Medicaid.
- Section 5082 of the Omnibus Budget Reconciliation Act of 1990, the Child Care and Development Block Grant of 1990, provides child care subsidies for low-income families in training programs or employment and funds for activities to improve the quality of child care and to increase the availability of early childhood development programs and before and after school care services.

- Temporary Child Care for Children with Disabilities and Crisis Nurseries Act of 1986, as amended, authorizes grants to states to assist public and private agencies in developing temporary child care for respite care services for children with disabilities and crisis nurseries for children who are abused or neglected, at risk of abuse and neglect, or in families receiving protective services. These programs are intended to maintain and support the family unit and strengthen the parent-child bond.
- Americans with Disabilities Act (ADA) of 1990 provides a basis for ensuring the civil rights of all people with disabilities, including infants and toddlers with disabilities, to access to both public and private accommodations.
- C.R.S. Article 10.5 of Title 27, Colorado Developmental Disabilities Act includes enabling legislation for supports and services for infants and toddlers with disabilities and their families.
- C.R.S. Article 5 of Title 26 is enabling legislation to provide child welfare services for all eligible populations including services for the protection of children whose physical, mental or emotional well-being is threatened by the actions or omissions of parents, legal guardians, custodians or other individuals responsible for the care of children.
- C.R.S. Article 1, Sections 202 - 205 of Title 27 pertains to the purchase of mental health services and adoption of rules and regulations concerning mental health services.
- Public Law 102-321 provides requirements concerning the targeting of mental health services, including children with severe emotional disturbance, as well as coordination of mental health services across relevant agencies.

V. INTENDED OUTCOMES

The Colorado Departments of Education, Public Health and Environment, Human Services, and Health Care Policy and Financing serve infants and toddlers with disabilities and their families. These Departments have contributed fiscal and personnel resources to a statewide early intervention service delivery system.

It is understood by the parties to this Agreement that these efforts shall be sustained and, where possible, strengthened through increased coordination to enhance the capacity of communities to be responsive to the full participation of families and to provide a seamless system of early intervention supports and services.

By signing this Memorandum of Understanding, the representative agencies commit to maintain coordination, cooperation and participation in the Part H Initiative in Colorado. This commitment will help to ensure:

- A. Increased access to local early intervention supports and services.
- B. Increased satisfaction of families with respect to early intervention supports and services.
- C. Increased collaboration with respect to shared expertise and planning based on the priorities, resources and concerns identified by the families of infants and toddlers with disabilities.
- D. Increased coordination between Departments in order to minimize unnecessary duplication of effort.
- E. Maximum utilization of funds and resources.

VI. MUTUAL OBJECTIVES

It is agreed by the parties to this Memorandum of Understanding that each will support the attainment of the following mutual objectives at the State and local level through contracts, grants, policies and procedures or regulations.

- To provide a collaborative, community directed, interagency child identification process, at no cost to families, to locate, evaluate and identify infants and toddlers with disabilities who may need Part H supports and services and to assist families in accessing community resources and early intervention supports and services.
- To provide, at no cost to families, service coordination to assist families of infants and toddlers with disabilities to receive the procedural safeguards, supports and services to which they are eligible.
- To develop with the family, at no cost to the family, an Individualized Family Service Plan (IFSP).
- To provide appropriate and necessary supports and services as identified on the IFSP utilizing available public and private funding sources, including sliding fee scales.
- To recognize and support family members to be active participants in the development and implementation of the IFSP.

- To support family members to be active participants at all levels in the development, implementation and evaluation of the statewide, comprehensive, interagency support and service delivery system.
- To share information about infants and toddlers with disabilities to the extent necessary and consistent with the confidentiality requirements of this part in order to get accurate and unduplicated counts for the USDE/OSEP to meet the Federal reporting requirements and to facilitate the effective and efficient delivery of supports and services at the State and local level.
- To provide coordinated training and technical assistance as appropriate for families and service providers across Departments.
- To provide information, names of resources, and referral about supports and services to a statewide central directory in order to provide an information and referral service for families and service providers.
- To provide technical assistance in the establishment and support of local interagency coordinating councils concerned with early intervention supports and services.
- To assure that Part H CICC values and requirements are addressed in all working agreements and Memoranda of Understanding that relate to infants and toddlers with disabilities and their families.

VII. AGENCY COMMITMENT TO OUTCOMES AND OBJECTIVES

Each state agency will:

- Designate at least one person to act as a coordinator on Part H issues;
- Engage in a strategic planning process through membership in the CICC that results in a Part H strategic plan and assure that progress is made in moving forward with the agreed upon outcomes and objectives;
- Work in collaboration with other early childhood initiatives;
- Support the ongoing development, implementation and evaluation of working agreements and strategies at the state and local level; and
- Assure that early intervention supports and services provided are consistent with the Part H values and regulations.

VIII. DEPARTMENT RESPONSIBILITIES

The Departments involved in this Memorandum of Understanding recognize that many of the following programs are operated under a diverse set of State and federal regulations and assure that funds available under Part H will be used to supplement and increase the level of supports and services and shall in no case be used to supplant State and local funds, insofar as Departments have control of such funds. Also, the parties to this agreement commit to more effectively use current resources through such activities as coordinated planning, training and marketing and integrated services delivery.

According to 34 CFR 303.124, Part H funds are to be used to supplement and increase the level of State and local funds expended, and in no case to supplant State and local funds. Nothing under IDEA, Part H may be construed to permit a State to reduce medical or other assistance available or to alter eligibility under Title V of the Social Security Act (SSA) (related to maternal and child health) or Title XIX of the SSA (related to Medicaid for children eligible for Part H) within the State.

Part H funds are to be used as Payor of Last Resort according to 303.527 and therefore may not be used to satisfy a financial commitment for early intervention supports and services that would otherwise have been paid for from other public sources but for the enactment of Part H.

Part H funds may be used in the interim, if necessary, to prevent a delay in the timely provision of early intervention supports and services to an infant or toddler with a disability and their family. Reimbursement procedures, if necessary, are referenced in Section XIII of this document.

Accordingly, the Departments involved in this Memorandum of Understanding assure continued provision of available resources to deliver early intervention supports and services to infants and toddlers with disabilities and their families insofar as they have control over these resources, subject to available appropriations, statutory authority and/or legislative mandates.

The identification, location, evaluation activities, service coordination and the development of the IFSP will be made available at no cost to families. For other early intervention supports and services, State policy and statutes allow for the Departments involved in this Memorandum of Understanding to develop and implement sliding fee scales. Agreements will be developed to articulate guidelines for the use of sliding fee scales and established rates which will be implemented at the local community level based on community resources and needs.

Colorado Department of Education will finance and provide:

- Coordination of the activities of the Part H system of supports and services which include the development and implementation of policies and procedures for the early intervention delivery system;
- Coordination of the Part H initiative with other early childhood initiatives in the Department of Education such as the Early Childhood Leadership Team, Goals 2000, Standards Based Education and other leadership and training initiatives, birth through 21 and with other relevant State and federal initiatives;
- Development of State and local interagency coordinating councils in order to assure the implementation of a coordinated, comprehensive, interagency early intervention system of supports and services;
- Coordination and dissemination of a central directory of information and referral resources to ensure access to information for families with infants and toddlers with disabilities and service providers;
- Coordination of a public awareness initiative with other Departments throughout the State that increases the general public's awareness of the effectiveness, need and availability of early intervention supports and services;
- Assurances that each local education agency (LEA) will actively participate in the development of an interagency child identification process to identify, locate, and evaluate infants and toddlers with disabilities who may need Part H supports and services;
- Assurances that each LEA provides for a seamless system of those supports and services through a comprehensive and coordinated transition system;
- Assurances that service coordination activities will be provided to infants and toddlers with disabilities and their families and that the development and implementation of an IFSP will be accomplished;
- Coordination of available funds, public and private, as appropriate to develop and achieve the provision of supports and services for infants and toddlers with disabilities as described in the IFSP;
- Technical assistance and training, upon request, to state and local community agencies, organizations and families to ensure the implementation of Part H within Colorado;

- Procedures to compile data required for reporting to the OSEP/USDE as well as coordinate state and local data collection and analysis for the effective and efficient delivery of supports and services; and
- Administration of funds received under Part H for the implementation of the early intervention support and service delivery system in Colorado.

Colorado Department of Health Care Policy and Financing will assure:

- Medical screening examination portion of evaluations for children, ages birth through two, who are enrolled in Medicaid through the Early Periodic Screening, Diagnosis and Treatment Program (EPSDT). The medical screening portion of the evaluation consists of a complete physical examination, a health and comprehensive developmental history. Vision, dental and hearing screenings are additional services provided to Medicaid-enrolled children;
- Specific procedures for providers of EPSDT screening services to identify health problems that may require intervention and convey the evaluation outcomes and treatment recommendations for incorporation into the IFSP;
- Diagnostic and treatment services for which federal financial participation is available under Title XIX, whether or not such services are included in the Colorado State Medicaid Plan, that are identified as medically necessary services as a result of an EPSDT screening. These medically necessary services will then be included as a part of the IFSP for EPSDT participants; and
- Collaboration in outreach and service coordination through the EPSDT administrative services cooperative agreement.

Colorado Department of Human Services, through its Offices and Divisions (including, but not limited to: Health and Rehabilitation - Developmental Disabilities, Mental Health, Alcohol and Drug Abuse; Children, Youth and Families - Child Welfare Services and Child Care), will assure that designated service agencies:

- Provide comprehensive service and support coordination, early intervention supports and services and family support services;
- Coordinate with the local Part H community efforts regarding outreach, training and technical assistance, identification, location and evaluation and service coordination for families and children;

- Use available funds, public and private, as appropriate to develop and achieve the provision of supports and services as described in the IFSP; and
- Collaborate in the development of an early intervention system of supports and services that will provide choices and options for families for the identified supports and services to be delivered in natural environments.

Colorado Department of Public Health and Environment will finance and assure that local public health agencies:

- Provide health care services funded through CDPHE programs to infants and toddlers with disabilities. These programs include the Health Care Program for Children with Special Needs (HCP), Developmental Evaluation Clinics, Well Child Program, EPSDT Outreach Program and Special Supplemental Food Program for Women, Infants and Children (WIC);
- Coordinate with state and local Part H community efforts regarding outreach, location, identification, evaluation of infants and toddlers with disabilities and comprehensive service coordination for families;
- Use available funds, public and private, as appropriate, to develop and achieve the provision of supports and services for infants and toddlers with disabilities and their families as described on the IFSP;
- Collaborate in the development of an early intervention system of supports and services that will provide choices and options for families for the identified supports and services to be delivered in natural environments; and
- Participate in training with other community agencies and families regarding the CICC Part H values, mandates and the CICC strategic plan.

IX. PROCEDURAL SAFEGUARDS

The Departments involved in this Memorandum of Understanding acknowledge the procedural safeguard required under Part H. Effective implementation of procedural safeguards is required in the Part H statutes and regulations by each public agency that is involved in the provision of early intervention supports and services. These include the rights parents have to:

- Review, correct and supplement records;

- Prior notice of meetings and information provided in native language;
- Consent prior to evaluations, IFSP development and provision of supports and services;
- Decline or accept any supports or services in whole or in part provided under Part H;
- Impartial procedures for resolving individual child and family complaints; and
- Confidentiality of information.

These also include the protection of the rights of children under Part H when:

- No parent can be identified;
- The public agency cannot discover the whereabouts of a parent; or
- The child is a ward of the State under the laws of the State.

X. CONFIDENTIALITY OF INFORMATION

The use or disclosure of any information concerning infants and toddlers with disabilities and their families shall be limited to purposes directly connected with the administration of the agency's programs or provision of supports and services in accordance with the procedures outlined in the procedural safeguard section of the Colorado Part H plan.

All policies and practices related to confidentiality shall be in accordance with State and federal statutes and regulations. The policies governing confidentiality of information are designed to ensure that parent's rights regarding the disclosure of personal information about themselves, their child and their family are honored.

XI. TRANSITION

As required by Part H, the IFSP must address the issue of transition from the early intervention system of supports and services to preschool services. It is anticipated that there will be children who receive early intervention supports and services under Part H who will not be eligible for preschool services for children with disabilities. Whether or not a child is eligible for continuing services under special education, the transition shall be anticipated and planned for in the IFSP based on the guidelines described in the Colorado Part H State Plan.

The agencies involved shall plan together in order to avoid duplication of evaluations and to facilitate transition from Part H to Part B preschool services or other appropriate supports and services to meet the requirements of the IFSP and continuing needs of the child.

XII. COORDINATION WITH OTHER STATE AND FEDERAL INITIATIVES

Some Colorado State agencies and initiatives, which may not directly fund or otherwise provide early intervention supports and services specific to Part H must also be included as essential participants in any effort to provide supports and services to families and children eligible under Part H. In addition to the specific Departments involved in this Memorandum of Understanding, other agencies and initiatives which are included as essential participants include, but are not limited to: The Insurance Division of the Department of Regulatory Agencies; Governor's office, specifically First Impressions, Bright Beginnings, Head Start Collaboration effort; State and federal Head Start initiatives such as Early Head Start; Healthy Tomorrows, Family Preservation and Support and Colorado DDPC.

Currently, a statewide agreement is being circulated for signature among the Colorado Department of Education and the Federal Regional Offices for Head Start for Regions VIII, IX and XII which include American Indian and Migrant Programs. This agreement articulates the coordination and collaboration of responsibilities and services particularly in the areas of the identification, location, evaluation of children and the responsibilities to ensure a seamless system of supports and services for children, birth through five and their families through a comprehensive and coordinated transition system.

XIII. STATE AGENCY DISPUTE RESOLUTION PROCESS

The Departments involved in this Memorandum of Understanding recognize the complexity of interagency coordination in a program as comprehensive as Part H of IDEA. The Departments will strive to keep communication open and frequent at both informal and formal levels. The Colorado Interagency Coordinating Council and the lead agency will function as avenues for open communication among all the agencies providing early intervention supports and services to infants and toddlers with disabilities and their families.

Procedures for timely resolution of such disputes which are binding upon all the Departments involved in this Memorandum of Understanding include the following:

- When disputes involve various divisions within a single agency, their internal administrative dispute procedures will be utilized.

- If disputes arise involving two or more Departments involved in this Memorandum of Understanding, the respective representatives will meet and attempt to resolve the matter.
- If this meeting does not resolve the dispute, the lead agency will assemble a meeting with representatives of the Departments involved in this Memorandum of Understanding and the co-chairs of the CICC to resolve the dispute in a timely manner.
- If the matter in dispute is in regard to financial responsibility and reimbursement procedures in respect to 303.527 - 528, the Departments involved in this Memorandum of Understanding assure collaborative, systemic and reasonable efforts to secure reimbursement to the appropriate agency or entity in a timely manner.

XIV. SUPERVISION AND MONITORING

The Colorado Department of Education as the lead agency for Part H of IDEA is responsible for the monitoring of all early intervention supports and services used by the State to comply with Part H and articulated in this Memorandum of Understanding.

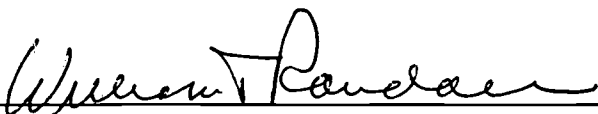
Monitoring Activities Include:

- Providing technical assistance if necessary to agencies, programs and entities,
- Enforcing any obligations imposed on those agencies, programs and entities under Part H of IDEA, and
- Correcting deficiencies that are identified through monitoring.


XV. REVIEW OF THE AGREEMENT

This interagency agreement shall be reviewed and updated at any time by mutual agreement of the Departments involved in this Memorandum of Understanding. The review shall be for the purpose of developing new agreements, modifications, clarifications, provisions or termination as necessary. This Memorandum of Understanding will become effective after signatures are affixed by the Executive Directors or Commissioner of the State Departments. Furthermore, this Memorandum of Understanding shall remain binding on all successors of the signatories to this agreement and the Departments they represent.


Signatures:


William T. Randall, Commissioner of Education
Colorado Department of Education

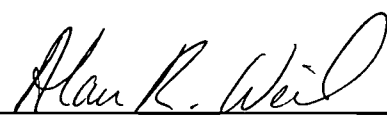
10/9/95
Date


Patti Shwayder, Acting Executive Director
Colorado Department of Public Health
and Environment

10-25-95
Date


Barbara McDonnell, Executive Director
Colorado Department of Human Services

11-3-95
Date


Alan R. Weil, Executive Director
Colorado Department of Health Care Policy
and Financing

10/19/95
Date



U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement (OERI)
Educational Resources Information Center (ERIC)



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